2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000088964

17001 COLLINS AVENUE, UNIT 1904

City-St-Zip: SUNNY ISLES BEACH, FL 33160

Address:

Entity Name: JADE 1904, LLC

FILED Jul 08, 2009 Secretary of State

Current P	rincipal Place of Business:	New Principal P	New Principal Place of Business:	
UNIT 1904	LLINS AVENUE LES BEACH, FL 33160			
Current Mailing Address:		New Mailing Ad	New Mailing Address:	
17001 COI UNIT 1904	LLINS AVENUE	New maining Au	uress.	
FEI Number:	FEI Number Applied For() ce with s. 607.193(2)(b), F.S., the limited liability co	FEI Number Not Applicable (
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:	
301	ALAN J CAYNE BOULEVARD A, FL 33180 US			
	named entity submits this statement for the e of Florida.	purpose of changing its regi	stered office or registered agent, or both	
SIGNATUR	RE:			
Electronic Signature of Registered Agent		gent	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANG	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM () Delete LEVY DUER, ABRAHAM 17001 COLLINS AVENUE, UNIT 1904 SUNNY ISLES BEACH, FL 33160	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete ROFFE DE LEVY, CAMILA 17001 COLLINS AVENUE, UNIT 1904 SUNNY ISLES BEACH, FL 33160	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	MGRM () Delete LEVY ROFFE, MEYER	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Address:

City-St-Zip:

SIGNATURE: ABRAHAM LEVY MGRM 07/08/2009